

<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing      OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	<b>Attorney Dock t Numb r</b>	JAM770
	<b>First Named Inventor</b>	Aaron Tabor
	<b>COMPLETE IF KNOWN</b>	
	Application Number	/
	Filing Date	
	Group Art Unit	
	Examiner Name	

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## article of manufacture and method for tree shaped candle holder

*(Title of the Invention)*

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)  as United States Application Number or PCT International

Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒ Customer Number: **30245** OR ☐ Correspondence address below

Name

Anthony Edw. J Campbell

Address

PO Box 160370

City

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State

TX

ZIP

78716-0370

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

**Aaron**

Family Name  
or Surname

**Tabor**

Inventor's  
Signature

Date

**11-10-3**

Residence: City

**NAPLES,**

State

FL

Country

US

Citizenship

US

Mailing Address

**650 93rd AVE N.**

City

**NAPLES,**

State

FL

ZIP

**34108**

Country

US

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

**N/A**

Family Name  
or Surname

Date

**11-10-3**

Inventor's  
Signature

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country



Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number

Filing Date

First Named Inventor

Aaron Tabor

Title

Art Unit

Examiner Name

Attorney Docket Number

JAM770

I hereby appoint:



Practitioners associated with the Customer Number:

30245

OR



Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:



The address associated with the above-mentioned Customer Number:

OR



The address associated with Customer Number:

OR

Firm or  
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:



Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name

Aaron Tabor

Signature



Date

11-10-03

Telephone

1-239-370-0058

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.



\*Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**ASSIGNMENT OF APPLICATION**

Docket Number (Optional)

**JAM770**

Whereas, I, Aaron Tabor of NAPLES, FL, hereafter  
referred to as applicant, have invented certain new and useful improvements in an  
\_\_\_\_\_ article of manufacture and method for tree shaped candle holder \_\_\_\_\_

☐ for which an application for a United States Patent was filed on \_\_\_\_\_

Application Number \_\_\_\_\_

☐ for which an application for a United States Patent was executed on \_\_\_\_\_, and

Whereas, Mark S. Grunberg of Fort Myers, FL here referred to as "assignee" whose mailing address is 3955 LUYERNE ST. F.M. FL 33901

desirous of acquiring the entire right, title and interest in the same;

Now, therefore, in consideration of the sum of ONE dollars (\$ 1.00), the receipt whereof is acknowledge, and other good and valuable consideration, I/We, the applicant(s), by these presents do sell, assign and transfer unto said assignee the full and exclusive right to the said invention in the United States and the entire rights, title and interest in and to any and all Patents which may be granted therefore in the United States. I/We hereby authorize and request the Director of the U.S. Patent and Trademark Office to issue said United States Patent to said assignee, of the entire right, title, and interest in and to the same, for his sole use and behoof; and for the use and behoof of his legal representatives, to the full end of the term for which said Patent may be granted, as fully and entirely as the same would have been held by me had this assignment and sale not been made.

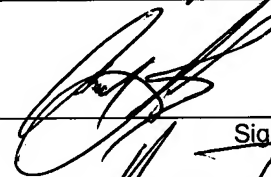
Executed this 10TH day of NOVEMBER, 20 03

at 3955 LUYERNE ST. FT. MYERS, FL 33901

State of FLORIDA )

County of LEE )

SS:



Signature

Printed Name/Registration No., if applicable

Before me personally appeared said AARON TABOR

and acknowledged the foregoing instrument to be his free act and deed this 10TH

day of NOVEMBER, 20 03

Seal



Kendall S. Atkinson, III  
MY COMMISSION # DD052450 EXPIRES  
October 15, 2005  
BONDED THRU TROY FAIR INSURANCE, INC.



Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, See below\*.

☐ Total of \_\_\_\_\_ forms are submitted.

This form offers a sample or suggested format for an assignment document. This sample form is not an OMB officially approved form.